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U.S.P.T.O.

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I hereby certify that this paper or fee is being deposited with the United States Postal Service's "Express Mail Post Office to Addressee" service under 37 C.F.R. § 1.10 on the date indicated above and is addressed to Mail Stop PATENT APPLICATION, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

By Bonnie A. Anderson [BONNIE A. ANDERSON]

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Longmeadow, Massachusetts 01106-1700

APPLICATION TRANSMITTAL LETTER

Mail Stop PATENT APPLICATION  
Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

Sir:

Transmitted herewith for filing is the patent application of

Inventor(s): **MOISES CALDERON**

For: **LOW FLOW ATRIAL-ARTERIAL SHUNT FOR  
PUMP-ASSISTED MYOCARDIAL REVASCULARIZATION  
WITHOUT CARDIOPULMONARY BYPASS**

Also enclosed are: 3 sheets of Formal drawings;  
Unexecuted Declaration and Power of Attorney;  
Information Disclosure Statement; and  
Prior Art Form

**CLAIMS AS FILED**

CLAIMS	(1) FOR	(2) NUMBER FILED	(3) NUMBER EXTRA	(4) RATE	(5) CALCULATIONS
BASIC FEE-----					\$385.00
Total Claims	19 - 20 =	0		x \$ 9.00	\$ -0-
Independent Claims	4 - 3 =	1		x \$ 43.00	\$ 43.00
Multiple Dependent Claim(s) (if applicable)				+ \$140.00	\$ -0-
TOTAL FILING FEE-----					\$428.00

SMALL ENTITY IS CLAIMED.

A check in the amount of \$428 is attached.

Please charge any additional fees or credit overpayment to Deposit Account No. 08-2622.

Respectfully submitted,

John A. Kramer

John A. Kramer  
Attorney for Applicant  
Registration No. 46302  
Customer No. 27804  
(413) 567-2076

Date: January 29, 2004

[02082P06]